

JC880 U.S. PTO
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PTO/SB/05 (2/98)

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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No. F-189

First Inventor or Application Identifier Robert A. Cordery, et al.

Title Secure User Certificate For Electronic Commerce Employing
Value Metering System

Express Mail Label No. EE628583767US

JC886 U.S. PTO
08/29/00

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

<p>1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Specification [Total Pages <input type="text"/>] (preferred arrangement set forth below)</p> <ul style="list-style-type: none"> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure <p>3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <input type="text"/>]</p> <p>4. Oath or Declaration [Total Pages <input type="text"/>]</p> <ul style="list-style-type: none"> a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 17 completed) <i>[Note Box 5 below]</i> i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b). <p>5. <input checked="" type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered to be part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</p>	<p>6. <input type="checkbox"/> Microfiche Computer Program (Appendix)</p> <p>7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</p> <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies
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ACCOMPANYING APPLICATION PARTS

<p>8. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>9. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney</p> <p>10. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>11. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>12. <input checked="" type="checkbox"/> Preliminary Amendment</p> <p>13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</p> <p>14. <input type="checkbox"/> Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application, (PTO/SB/09-12) <input type="checkbox"/> Status still proper and desired</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p> <p>16. <input type="checkbox"/> Other:</p>

* NOTE FOR ITEMS 1 & 14: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

Continuation Divisional Continuation-in-part (CIP)

of prior application No: 09 / 133,706

Prior application information: Examiner S. Cangialosi

Group / Art Unit: 2732

18. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label	(Insert Customer No. or Attach bar code label here)
--	---

or Correspondence address below

Name	Pitney Bowes Inc. Charles R. Malandra, Jr.		
Address	35 Waterview Drive		
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Name (Print/Type)	Charles R. Malandra, Jr.	Registration No. (Attorney/Agent)	31,038
Signature	<i>Charles R. Malandra</i>		
	Date 8-29-2000		

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re patent application of:) Attorney Docket No.: F-189
Robert A. Cordery, et al.) Group Art Unit: N/A
Serial No.: N/A) Examiner: N/A
Filed: Concurrently herewith) Date: August 29, 2000
Title: SECURE USER CERTIFICATE FOR ELECTRONIC COMMERCE
EMPLOYING VALUE METERING SYSTEM

CERTIFICATE OF MAILING BY EXPRESS MAIL

Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

In accordance with the provisions of 37 CFR 1.10, I hereby certify that the attached Patent Application, Drawings, CPA transmittal letter, Preliminary Amendment, Declaration and Power of Attorney was deposited with the U.S. Postal Service for delivery by Express Mail on August 28, 2000. The number of the Express Mail mailing label is EE628583767US.

Respectfully submitted,


Charles R. Malandra, Jr.
Reg. No. 31,038
Attorney of Record
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PITNEY BOWES INC.
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August 29, 2000

JC836 U.S. PTO
09/650174
08/29/00

BOX PATENT APPLICATION
ASSISTANT COMMISSIONER FOR PATENTS
WASHINGTON, D.C. 20231

Sir:

For the application transmitted herewith

For: **SECURE USER CERTIFICATE FOR ELECTRONIC COMMERCE EMPLOYING VALUE METERING SYSTEM**

Docket Number F-189

Inventor: Robert A. Cordery, et al.

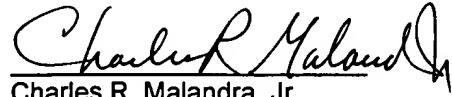
The filing fees, after entry of the Preliminary Amendment field herewith, are calculated as follows:

Basic Fee						\$ 790.00
Claims Fee	Number Filed		Number Extra		Rate	
Total Claims	2	- 20 =	0	X	\$22.00	= \$ 00.00
Independent Claims	1	- 3 =	0	X	\$82.00	= \$ 00.00
Multiple Dependent Claims					\$270.00	= \$
					Total Filing Fee	\$790.00

Please charge our Deposit Account Number **16-1885** in the amount of \$ 790.00 for the filing fee.

The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Account Number **16-1885**.

A copy of this Transmittal Letter is enclosed for use in charging the Deposit Account.


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